PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

107/0/229

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			3.6					RATE	FEE	7	RATE	FEE
FC)R	·· N = W.	NUMBER FILED		NUMBER EXTRA			BÁSIC FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	36 mir	nus 20=	* 16			X\$ 9=		OR	X\$18=	288
INE	EPENDENT C	LAIMS	9 mi	nus 3 =	*	4		X43=		OR	X86=	344
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter					"0" in c	column 2		TOTAL	<u> </u>	OR	TOTAL	1402
CLAIMS AS AMENDED - PART II								SMALL	ENTITY		OTHER SMALL I	THAN
$\overline{}$	(Column 1)		T	(Colun		(Column 3)	, T	SWALLE	ADDI-	OR 1 I	SWALLE	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus			=		X43=		OR	X86=	
L	FIRST PRESE	ENTATION OF MU	JETIPLE DEF	ENDENI	CLAIM		ן ו	+145=		OR	+290=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		о ОR	X86=	
	FIRST PRESE	NTATION OF ML	JETIPLE DEP	ENDENT	CLAIM		'	+145=		OR	+290=	
·							L	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT, FEE	
			DDM. I CE			ODII.I CES						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	T tal	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	01.414	-		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
**	* If the entry in column 1 is less than the ntry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								·	OP L	TOTAL DDIT. FEE	
*** 	the "Highest Nur The "Highest Nurn	mber Previously Pa ber Previously Paid	id For" IN THIS I For" (Total or	S SPACE is Independer	less thar nt) is the	n 3, enter "3." highest number		DDIT. FEE L	ropriat box		٠.	